

**Fax**

To:	Commissioner for Patents	From:	Jill Woodburn
Fax:	571-273-2885	Pages:	7
Phone:		Date:	November 14, 2005
Re:	09/554,844	CC:	

Applicants: ZIMMER et al.
Serial No.: 09/554,844
Filed: Sept. 19, 2000
Entitled: Analytical Test Element With a Capillary Channel
Ref. No.: RDID 0044 US
Group No.: 1641
Examiner: Chin, Christopher

Attachments:

- Transmittal Form (1pp)
- Fee Transmittal (1pp)(duplicate)
- Terminal Disclaimer to Obviate a Double Patenting Rejection over a "Prior" Patent (1pp)
- Issue Fee Transmittal (1pp) (duplicate)
- Fax Transmittal (1pp)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/554844	
	Filing Date	09-19-2000	
	First Named Inventor	Zimmer	
	Art Unit	1641	
	Examiner Name	Chin	
Total Number of Pages in This Submission	7	Attorney Docket Number	WP 16407 US

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input checked="" type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Issue Fee Transmittal (1pp)(duplicate) Fax Transmittal (1pp)
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	The Law Office of Jill L. Woodburn, LLC		
Signature			
Printed name	Jill L. Woodburn		
Date	11-14-2005	Reg. No.	39874

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Signature	
Typed or printed name	Jill L. Woodburn
Date	11-14-2005

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